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Bib Data Sheet

CONFIRMATION NO. 2486

SERIAL NUMBER 10/621,284	FILING DATE 07/17/2003  RULE	CLASS 351	GROUP ART UNIT 2873	ATTORNEY DOCKET NO. 62188.011300
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *None* \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 10/17/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Hayden</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 14	INDEPENDENT CLAIMS 4
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TITLE  
 INTERCONNECTING ASSEMBLY IN COMBINATION WITH PRIMARY AND AUXILIARY EYEGLASSES

FILING FEE  RECEIVED 525	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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